

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	11
FORMALITY REVIEW	H-T	913	08/21/01
RESPONSE FORMALITY REVIEW	HL	912	10-26-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	11/1/01
2	11/1/01
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Jc 709  
 08/21/01  
 10/26/01